## Exhibit I

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1
           IN THE UNITED STATES DISTRICT COURT
       FOR THE SOUTHERN DISTRICT OF WEST VIRGINIA
 2
                    CHARLESTON DIVISION
 3
     IN RE: ETHICON, INC.,
     PELVIC REPAIR SYSTEMS
 4
     PRODUCTS LIABILITY LITIGATION MDL NO. 2327
 5
    Jo Huskey and Allen
    Huskey,
 6
 7
              Plaintiffs,
                                Case No. 2:12-cv-05201
    v.
 8
    Ethicon, Inc., et al.,
 9
               Defendants.
10
11
12
13
14
                    ORAL DEPOSITION OF
15
                 CHRISTINA PRAMUDJI, M.D.
                  Friday, April 11, 2014
16
17
18
19
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21
22
                GOLKOW TECHNOLOGIES, INC.
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23
24
                    deps@golkow.com
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the removal surgeries can be significantly
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- 2 more complicated than the original
- implantation surgery for the TVT-0, right?
- 4 MR. SNELL: Form.
- 5 A. It can be harder to find the
- 6 sling if it's not a dyed sling.
- 7 BY MS. KIRKPATRICK:
- 8 O. And the removal surgery requires
- 9 dissection of some of the pelvic tissue,
- 10 correct?
- 11 A. Well, it requires dissecting
- around the urethra, primarily.
- 0. And that can cause additional
- scar tissue, correct, simply because you're
- having more surgery in the same location?
- 16 A. It could, yes.
- Q. Are there any other complications
- that you think are risks that come from the
- 19 removal surgery itself?
- 20 A. No.
- Q. So just the possibility of
- additional scarring?
- 23 A. Yes.
- Q. Okay. We've been talking a lot

- about kind of the procedure that's used here.
- You're not a biomaterials expert, correct?
- 3 A. Well, I know about the materials
- 4 that I use for surgery, so I would say that
- 5 I -- you know, I'm knowledgeable about what I
- 6 implant in patients.
- 7 Q. Okay. What's the Ethicon TVT-O
- 8 sling made of?
- 9 A. Polypropylene.
- 0. Okay. What's added to that
- polypropylene?
- 12 A. What's added to it?
- 0. Uh-huh.
- 14 A. I don't know if anything's added
- to it.
- Q. Do you know if there's any
- antioxidants used in it?
- A. No, I don't know.
- 19 Q. Do you know what its molecular
- weight is?
- A. I've seen it before, but I don't
- 22 know off the top of my head.
- Q. Do you know whether it's been
- oxidized before it's been placed into a

```
1
      woman's body?
 2
           Α.
                  No.
 3
                  Do you know anything about the
           Ο.
 4
      process of oxidation of polypropylene?
 5
           Α.
                  No.
 6
                  And that's not the type of
           Ο.
 7
       information -- you know that it's made of
 8
      polypropylene, but you're not intending to
 9
      offer opinions here concerning the chemical
      processes that are involved with
10
11
      polypropylene, correct?
12
                  I don't know about the chemical
           Α.
13
      processes.
14
                  Okay. So you would defer -- you
           Ο.
      would defer to other experts who would be
15
16
      biomaterials experts or who would be
17
      specialists in polypropylene for that
18
      particular type of information?
19
                  MR. SNELL:
                              Form.
20
                  I know how it -- I focus on it
           Α.
21
      from the perspective of my patients.
22
      BY MS. KIRKPATRICK:
23
                  Okay. So you focus, though, on
           Ο.
24
      how you believe the polypropylene sling
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performs in your patients, both from an
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- efficacy standpoint, correct, and from
- 3 complications that you see?
- 4 A. From my experience and from the
- 5 vast body of literature that's available on
- 6 polypropylene slings.
- 7 Q. Okay. But I guess I'm just
- 8 trying to figure out what the parameters of
- your testimony are. You're not going to come
- in and you're not planning on holding
- 11 yourself out as an expert on polymers and
- polypropylene and degradation or any of those
- particular issues related to polypropylene,
- 14 are you?
- MR. SNELL: Form. And I will say
- she is. I am putting her up on that, and
- it is in her report.
- 18 BY MS. KIRKPATRICK:
- Q. Okay. How does polypropylene
- degrade?
- A. It doesn't degrade.
- Q. So your opinion, sitting here
- today, that there is no way that any
- polypropylene that exists in this world can

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1
      degrade?
2
                  MR. SNELL: That's overbroad,
3
           form.
4
                  Go ahead.
5
                  That's a very broad question.
           Α.
6
      You know, from how it's used in the body in
7
      sutures and in slings, it doesn't degrade;
8
      that's why it's a permanent suture. That's
9
      why heart surgeons rely on it and cardiac
10
      surgeons rely on it to sew up your aorta when
11
      you have aortic surgery.
12
                  So if it degraded, it would not
13
      be used in that application. There's no
14
      clinical degradation that occurs.
15
      BY MS. KIRKPATRICK:
16
                  So you believe that there's no
17
      evidence that exists, either in Ethicon's own
18
      documents or in the literature, that supports
19
      the theory that polypropylene sutures can
20
      degrade --
21
                  MR. SNELL: Form.
22
                  Go ahead.
23
      BY MS. KIRKPATRICK:
24
                  -- in vivo?
           Q.
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1
                  MR. SNELL: Form.
2
          Α.
                  I mean, I can't say that there's
3
      nothing out there that they didn't do any
4
      kind of manipulation to polypropylene or look
5
      at it a certain way and found some
6
      degradation there, but does it matter to
7
      patients and to this case, no.
8
      BY MS. KIRKPATRICK:
9
                  Has Mr. Snell or any of the
10
      attorneys for Ethicon provided you with any
11
      Ethicon documents reflecting degradation of
12
      polypropylene sutures?
13
                  I mean, I think I saw some
14
      internal communication, I can't remember if
15
      it was from Mr. Kountze or from Mr. Snell, I
16
      don't remember, but I know that that is out
17
      there, that that was something that the
18
      engineers were talking about and Ethicon was
19
      talking about.
20
                  But clinically, I'm telling you
21
      it does not make a difference, and I don't
22
      believe that there's degradation that occurs
23
      that it makes any hill of beans' difference
24
      for patients.
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1
           Q.
                  Okay. So let me just figure out
2
      what you are testifying about and what you're
3
      not testifying about. You don't have a basis
4
      for saying whether polypropylene does or
5
      doesn't degrade.
6
                  What you are here to offer your
7
      opinion on is that regardless of whether
8
      polypropylene degrades or doesn't degrade,
9
      there's no clinical significance to a
10
      particular patient?
11
                  I don't think it degrades.
           Α.
12
                  MR. SNELL: Hold on, hold on,
13
                     Form. That misstates, too.
          hold on.
14
                  Go ahead.
15
                  I don't think it degrades and I
           Α.
16
      think there's other evidence that shows that
17
      it doesn't degrade.
18
      BY MS. KIRKPATRICK:
19
           Ο.
                  Have you asked Ethicon, in
20
      reaching that opinion, to provide you with
21
      all of the information that they have
22
      concerning the potential degradation of
23
      polypropylene sutures?
24
           Α.
                  No.
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